&

1			
)	PART B -	FEE(S)	TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or Eax

(703) 746-4000

and RITH ICATION BITH (if remined) Blocks I through 5 should be completed where

	CURRENT CORRESPONDENC	S. HADDRESS (Num: Goo Blook) for	my change of address)	Note: A verificate of mailing can only be used for domostic mailings of the					
	72.60	an 02.050/06		papers. Each additional have its own conflicts	Fee(s) Transmittal. This certificate connot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
		917/2903 RNICK & D'ALESS	ו ב-ספטוע א	•			•		
	3 E-COMM SQUA		ZIPES	<u>`</u>	I hereby corruity that the	Crifficate of Malling or Transmission I hereby contriving that this Fee(a) Trunsmittal is being deposited with the Unland States Postal Service with sufficient postage for first class mail in an envolope addressed to the Mail Stop ISSUB FEE address above, or being factimate transmitted to the USPTO (703) 746-4000, on the date indicated below.			
	ALBANY, NY 122		70 . **	<i>'</i> غِرُ	addressed to the Mu	I Stop ISSUB FEE address	apore or peing tresimile		
/12/	2005 HBEYENE2 0000	0099 090458 106041	111	<u>"</u>	transmitted to the USI	10 (703) 746-4000, an the d	(Depositure turne)		
FC:	1501 🚆 1400.00	DA \	MAY 1 0 2005	OFFICE			(Signatoro)		
	1504 300.00			`\$\ `			(Dole)		
_	J.		THADEWAY,	<u>></u>					
L	APPLICATION NO.	FILING DATE	W THAUE P	TRST NAME	D INVENTOR	ATTURNEY DUCKET NO.	CONFIRMATION NO.		
	10/604,111	06/26/2003		Putrick A	A. Coico	Ff\$920030134U\$1	1110		
TI	TLE OF INVENTION: P	reparing MCM hat fo	r removal						
	Re								
_	415					T			
L	APPLN. TYPE	SMALL ENTITY	ISSUE PB		PUBLICATION PEE	TOTAL FEE(S) DUE	DATE DUE		
	nonprovisional	Ю	\$1400		\$300	\$1700	05/17/2005		
	EXAMINER		ART UNIT		CLASS-SUBCLASS]			
	COOKE. C	olleen p	1754	•	228-119000	•			
Ĉ	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) utuched. "Fee Address" indication (or "Fue Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customet Number is required.			(1) the names of up to 3 registered patent anotheys or agents OR, alternatively. (2) the name of a single furn (having as a member o registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. It no name is listed, no name will be printed.					
3.	ASSIGNEE NAME AND	RESIDENCE DATA TO E	ד אס משראשיי שנ	HE PATEN	l' (print or type)				
	PLEASE NOTE: Unless recordation as set forth in	an ausigned is identified b 37 CFR 3.11. Completion	olow, no unsigned to this form is NOT	gga lliw mal Saubsticuto	pear on the patent. If an assignment,	nee is identified bolow, due o	kecument has been filed the		
	(A) NAME OF ASSIGN	BE	B) residenc	CE: (CITY and STATE OR CO	OUNTRY)			
	International	l Business Mach	nines Corpo	,	,		_		
P		e assignoe category or catego	ories (will not be pri	nted on the	patent): 🔲 Individual 🕮 (Corporation or other private gr	roup ontity U Government		
_	case check the appropriate. The following fee(s) are			Payment of	i Fec(s):		roup antity U Government		
_	ease check the appropriate. The following fee(s) are	euclosed:	46.	Payment of A check	Pec(s): in the animal of the foc(s) is o	nelosod.	roup entity U Government		
_	ease check the appropriate. The following fee(s) are D Issue Fee Publication Fee (No.	euclosed: mull eatity discount permitt	46.	Payment of A check	(Pec(s): in the amount of the foc(s) is o t by credit card. Parm PTO-203	nelosed. 18 is attached.	r credit and avaragement to		
_	ease check the appropriate. The following fee(s) are	euclosed: mull eatity discount permitt	46.	Payment of A check	Pec(s): in the animal of the foc(s) is o	nelosed. 18 is attached.	r credit any avaragement to		
44	euse check the uppropriate The following fee(s) are In the following fee(s) are Problem Foe Advance Order - # o Change in Entiry Status	euclosed: mull entity discount permit f Copies (from status indicated who	4b. ed) 	Payment of A check Paymon The Dir Deposit Acc	Pec(s): in the amount of the foc(s) is o t by credit card. Porm PTO-203 ector is hereby authorized by commt Number 09 0458	nelosed. 8 is attached. charge the required fee(s), or (TDM) (enclose an extra-	r credit any ovorpayment, lo copy of this form).		
44 5.	euse check the uppropriate The following fee(s) are In the following fee(s) are Problemion Fee Advance Order - # o Chenge in Entity Status La Applicant claims S	euclosed: mull eathy discount permit f Copies (from status indicated abov MALL ENTITY status. See	4b. ed) z) 37 CFR 1.27.	Paymont of A check Psymont Psymont The Dir Deposit Acc	Fee(s): in the amount of the fee(s) is of thy credit card. Form PTO-203 ector is hereby authorized by come Number 09.0458.	nelosed. 18 is attached. charge the required foc(s), on	r credit any overpayment, to copy of this form). CFR 1.27(3)(2).		
44 5.	euse check the uppropriate The following fee(s) are In the following fee(s) are Problemion Fee Advance Order - # o Chenge in Entity Status La Applicant claims S	euclosed: mull eathy discount permit f Copies (from status indicated abov MALL ENTITY status. See	4b. ed) z) 37 CFR 1.27.	Paymont of A check Psymont Psymont The Dir Deposit Acc	Pec(s): in the amount of the foc(s) is o t by credit card. Porm PTO-203 ector is hereby authorized by commt Number 09 0458	nelosed. 18 is attached. charge the required foc(s), on	r credit any overpayment, to copy of this form). CFR 1.27(3)(2).		
44 5.	euse check the uppropriate The following fee(s) are In the following fee(s) are Problemion Fee Advance Order - # o Chenge in Entity Status La Applicant claims S	euclosed: mull eathy discount permit f Copies (from status indicated abov MALL ENTITY status. See	4b. ed) z) 37 CFR 1.27.	Paymont of A check Psymont Psymont The Dir Deposit Acc	Fec(s): in the amount of the fec(s) is of the credit card. Form PTO-203 ector is hereby authorized by come Number 08 0458—come is no longer claiming SMA my) or to re-apply any previous is other than the applicant; a re-	nelosed. 18 is attached. charge the required foc(s), on	r credit any overpayment, to copy of this form). TR 1.27(3)(2). Estion identified above, the assignment or other party in		

Registration No. 40,398 Typod or printed name __Spencer_K

This collection of information is required by 37 CFR 1.311. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including garbering, proparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, C.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED PORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rav. 12/04) Approved for uso through 04/30/2007.

OMB 0651-0053 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE